



02-27-04

1648

Atty. Docket No. ECV-5630
Client Matter No. 89288.0009
Express Mail No. EV322529637US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Crystal M. Cunanan, et al.

Serial No. 10/004,624

Filed: November 1, 2001

For: METHODS FOR PREPARATION OF
BIOPROSTHETIC TISSUE AND IMPLANTABLE
DEVICES COMPRISING SUCH BIOPROSTHETIC
TISSUE

Group Art Unit: 1648

Examiner: Winkler, Ulrike

To: Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

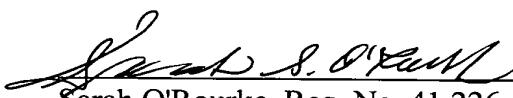
PETITION FOR THREE MONTH TIME EXTENSION

Sir:

The Applicants hereby request an extension of time of three months, from November 26, 2003 to February 26, 2004, in which to respond to the Office Action dated August 26, 2003. A check for the required fee for this petition is submitted herewith.

Respectfully submitted,

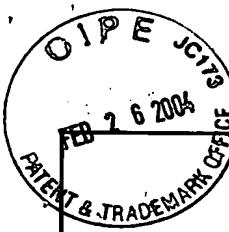
Dated: Feb. 26, 2004


Sarah O'Rourke, Reg. No. 41,226
Hogan & Hartson LLP
One Tabor Center
1200 17th Street, Suite 1500
Denver, CO 80202
(720) 406-5385 Tel
(720) 406-5301 Fax

03/03/2004 MMEKONEN 00000067 10004624

01 FC:1253

950.00 0P



FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT **(\$)** **950**

Complete if Known

| | |
|----------------------|----------------------------|
| Application Number | 10/004,624 |
| Filing Date | November 1, 2001 |
| First Named Inventor | Crystal M. Cunanan, et al. |
| Examiner Name | Winkler, Ulrike |
| Group / Art Unit | 1648 |
| Attorney Docket No. | ECV-5630 |

METHOD OF PAYMENT (check all that apply)

check credit card money order other none
 Deposit Account

Deposit Account Number **50-1123**

Deposit Account Name **Hogan & Hartson L.L.P.**

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description | Fee Paid |
|-----------------------|-----------------------|--|----------|
| 130 | 65 | Surcharge – late filing fee or oath | |
| 50 | 25 | Surcharge – late provisional filing fee or cover sheet | |
| 130 | 130 | Non-English specification | |
| 2,520 | 2,520 | For filing a request for ex parte reexamination | |
| 920* | 920* | Requesting publication of SIR prior to Examiner action | |
| 1,840* | 1,840* | Requesting publication of SRI after Examiner action | |
| 110 | 55 | Extension for reply within first month | |
| 420 | 210 | Extension for reply within second month | |
| 950 | 475 | Extension for reply within third month | 950 |
| 1,480 | 740 | Extension for reply within fourth month | |
| 2,010 | 1,005 | Extension for reply within fifth month | |
| 330 | 165 | Notice of Appeal | |
| 330 | 165 | Filing a brief in support of an appeal | |
| 290 | 145 | Request for oral hearing | |
| 1,510 | 1,510 | Petition to institute a public use proceeding | |
| 110 | 55 | Petition to revive – unavoidable | |
| 1,330 | 665 | Petition to revive – unintentional | |
| 1,330 | 664 | Utility issue fee (or reissue) | |
| 480 | 240 | Design issue fee | |
| 640 | 320 | Plant issue fee | |
| 130 | 130 | Petitions to the Commissioner | |
| 50 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 180 | 180 | Submission of Info Disclosure Stmt | |
| 40 | 40 | Recording each patent assignment per property (times number of properties) | |
| 770 | 385 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 770 | 385 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 770 | 385 | Request for Continued Examination | |
| 900 | 900 | Request for Expedited Examination of a design application | |
| Other fee (specify) | | | |

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$950)

SUBTOTAL (1) **(\$)**

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| | -20**= | X | = |
| Independent Claims | -3**= | X | = |
| Multiple Dependent | | 0 | = |

**or number previously paid, if greater; For Reissues, see below

| Large Entity Fee (\$) | Small Entity Fee (\$) | Fee Description |
|-----------------------|-----------------------|---|
| 18 | 9 | Claims in excess of 20 |
| 86 | 43 | Independent claims in excess of 3 |
| 290 | 145 | Multiple dependent claim, if not paid |
| 86 | 43 | **Reissue independent claims over original patent |
| 18 | 9 | **Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) **(\$)**

SUBMITTED BY Complete (if applicable)

Name (Print/Type) **Sarah S. O'Rourke** Registration No. (Attorney/Agent) **41,226** Telephone **(720) 406-5385**

Signature

Date

Feb. 24, 2004